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<b>REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	09/972,582
	Filing Date	October 5, 2001
	First Named Inventor	Sarvajit CHAKRAVARTY
	Art Unit	1624
	Examiner Name	H. Liu
	Attorney Docket Number	219002028402

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☐ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

Client requested transfer

### CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Mark Warfield Associate Patent Counsel Johnson & Johnson		
Address	1 Johnson & Johnson Plaza		
City	New Brunswick	State	NJ
Country	U.S.A.		
Telephone		Email	
Signature	/Kate H. Murashige/		
Name	Kate H. Murashige	Registration No.	29,959
Date	June 5, 2008	Telephone No.	(858) 720-5112

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.